

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 C.F.R. 1.53(b))	Attorney Docket No.	<b>R0151B-REG</b>
	First Inventor	<b>Maag, Hans et al.</b>
	Title	<b>Substituted Benzoxazinones and Uses Thereof</b>
	Express Mail Label No.	<b>ER 494672750 US</b>

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification (Total Pages <b>69</b> ) (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) (Total Sheets <b>3</b> ) 5. Oath or Declaration (Total Sheets <b>3</b> ) a. <input checked="" type="checkbox"/> Newly executed (copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATIONS PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)  
Prior application information: Examiner \_\_\_\_\_

of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Art Unit: \_\_\_\_\_

**Claim for Benefit of Provisional Application(s):**

This Application claims the benefit under title 35 U.S.C. 119(e) of U.S. Provisional Application No. **60/424,946**, filed **November 8, 2002**.

**19. CORRESPONDENCE ADDRESS**

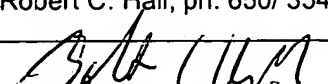
☒ Customer Number or Bar Code Label

**24372**

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

Name	Grant D. Green ROCHE PALO ALTO LLC				
Address	Patent Law Dept., M/S A2-250 3431 Hillview Avenue				
	PALO ALTO, CA 94304				
City	Palo Alto	State	CA	Zip Code	94304
Country	U.S.A.	Telephone	650/ 855-5311	Fax	650/ 855-5322

Name (Print/Type)	Robert C. Hall, ph. 650/ 354-7540	Registration No. (Attorney/Agent)	39,209
Signature		Date	Nov. 6 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Doc. #122566v1

<b>FEE TRANSMITTAL for FY 2003</b>		<i>Complete if Known</i>	
<i>Effective 01/01/2003. Patent fees are subject to annual revision.</i>		Application Number	<b>New Application</b>
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 1,310.00		First Named Inventor	<b>Maag, Hans et al.</b>
		Examiner Name	unassigned
		Art Unit	
		Attorney Docket No.	<b>R0151B-REG</b>

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																				
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: <div style="margin-top: 10px;">           Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">18-1700</span>             Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">Roche Palo Alto LLC 3431 Hillview Avenue Palo Alto, CA 94304</span> </div> <p><b>The Director is authorized to: (check all that apply)</b>  <input checked="" type="checkbox"/> Charge fee(s) indicated below   <input checked="" type="checkbox"/> Credit any overpayments  <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application  <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>	<b>3. ADDITIONAL FEES</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051 65</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052 25</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053 130</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812 2,520</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804 920*</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805 1,840*</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251 55</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252 205</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253 465</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254 725</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255 985</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401 160</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402 160</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403 140</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451 1,510</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452 55</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453 650</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501 650</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502 235</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503 315</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460 130</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807 50</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806 180</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021 40</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809 375</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810 375</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801 375</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802 900</td><td></td></tr> </tbody> </table> <p>Other fee (specify) _____</p> <p>*Reduced by Basic Filing Fee Paid      <b>SUBTOTAL (3)</b> (\$ 0)</p>	Large Entity	Small Entity	Fee Description	Fee Paid	1051	130	2051 65		1052	50	2052 25		1053	130	1053 130		1812	2,520	1812 2,520		1804	920*	1804 920*		1805	1,840*	1805 1,840*		1251	110	2251 55		1252	410	2252 205		1253	930	2253 465		1254	1,450	2254 725		1255	1,970	2255 985		1401	320	2401 160		1402	320	2402 160		1403	280	2403 140		1451	1,510	1451 1,510		1452	110	2452 55		1453	1,300	2453 650		1501	1,300	2501 650		1502	470	2502 235		1503	630	2503 315		1460	130	1460 130		1807	50	1807 50		1806	180	1806 180		8021	40	8021 40		1809	750	2809 375		1810	750	2810 375		1801	750	2801 375		1802	900	1802 900	
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																		
1051	130	2051 65																																																																																																																			
1052	50	2052 25																																																																																																																			
1053	130	1053 130																																																																																																																			
1812	2,520	1812 2,520																																																																																																																			
1804	920*	1804 920*																																																																																																																			
1805	1,840*	1805 1,840*																																																																																																																			
1251	110	2251 55																																																																																																																			
1252	410	2252 205																																																																																																																			
1253	930	2253 465																																																																																																																			
1254	1,450	2254 725																																																																																																																			
1255	1,970	2255 985																																																																																																																			
1401	320	2401 160																																																																																																																			
1402	320	2402 160																																																																																																																			
1403	280	2403 140																																																																																																																			
1451	1,510	1451 1,510																																																																																																																			
1452	110	2452 55																																																																																																																			
1453	1,300	2453 650																																																																																																																			
1501	1,300	2501 650																																																																																																																			
1502	470	2502 235																																																																																																																			
1503	630	2503 315																																																																																																																			
1460	130	1460 130																																																																																																																			
1807	50	1807 50																																																																																																																			
1806	180	1806 180																																																																																																																			
8021	40	8021 40																																																																																																																			
1809	750	2809 375																																																																																																																			
1810	750	2810 375																																																																																																																			
1801	750	2801 375																																																																																																																			
1802	900	1802 900																																																																																																																			
<b>1. BASIC FILING FEE</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>Utility filing fee</td><td>770.00</td></tr> <tr><td>1002</td><td>330</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b> (\$ 770)</p>	Large Entity	Small Entity	Fee Description	Fee Paid	1001	770	Utility filing fee	770.00	1002	330	Design filing fee		1003	520	Plant filing fee		1004	750	Reissue filing fee		1005	160	Provisional filing fee		<b>2. EXTRA CLAIM FEES</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Total Claims</td> <td>50</td> <td>-20 **</td> <td>=</td> <td>30</td> <td>X</td> <td>18</td> <td>=</td> <td>540</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>-3 **</td> <td>=</td> <td>0</td> <td>X</td> <td>86</td> <td>=</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$ 540.00)</p>	Total Claims	50	-20 **	=	30	X	18	=	540	Independent Claims	2	-3 **	=	0	X	86	=	0	Multiple Dependent					X		=	0	Large Entity	Small Entity	Fee Description	Fee Paid	1202	18	Claims in excess of 20		1201	86	Independent claims in excess of 3		1203	280	Multiple dependent claim, if not paid		1204	84	** Reissue independent claims over original patent		1205	18	** Reissue claims in excess of 20 and over original patent																																										
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																		
1001	770	Utility filing fee	770.00																																																																																																																		
1002	330	Design filing fee																																																																																																																			
1003	520	Plant filing fee																																																																																																																			
1004	750	Reissue filing fee																																																																																																																			
1005	160	Provisional filing fee																																																																																																																			
Total Claims	50	-20 **	=	30	X	18	=	540																																																																																																													
Independent Claims	2	-3 **	=	0	X	86	=	0																																																																																																													
Multiple Dependent					X		=	0																																																																																																													
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																		
1202	18	Claims in excess of 20																																																																																																																			
1201	86	Independent claims in excess of 3																																																																																																																			
1203	280	Multiple dependent claim, if not paid																																																																																																																			
1204	84	** Reissue independent claims over original patent																																																																																																																			
1205	18	** Reissue claims in excess of 20 and over original patent																																																																																																																			

\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Robert C. Hall	Registration No. Attorney/Agent	39,209
Signature		Telephone	650/ 354-7540
		Date	Nov. 6 2003